

Booker

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO. 10/089171	FILING DATE		
						APPLICANT(S)			
						CLAIMS			
AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		*	*	*	
IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/	/	/			51			
2	/	/	/			52			
3	2	/	/			53			
4	2	/	/			54			
5	2	/	/			55			
6	2	/	/			56			
7	2	/	/			57			
8	2	/	/			58			
9	2	/	/			59			
10	2	/	/			60			
11	2	/	/			61			
12	2	/	/			62			
13	2	/	/			63			
14	2	/	/			64			
15	2	/	/			65			
16	2	/	/			66			
17	2	/	/			67			
18	2	/	/			68			
19	2	/	/			69			
20	2	/	/			70			
21	2	/	/			71			
22	2	/	/			72			
23	2	/	/			73			
24	2	/	/			74			
25	2	/	/			75			
26	2	/	/			76			
27	2	/	/			77			
28	2	/	/			78			
29						79			
30						80			
31						81			
32						82			
33						83			
34						84			
35						85			
36						86			
37						87			
38						88			
39						89			
40						90			
41						91			
42						92			
43						93			
44						94			
45						95			
46						96			
47						97			
48						98			
49						99			
50						100			
TOTAL IND.		2	2			TOTAL IND.			
TOTAL DEP.		26	26			TOTAL DEP.			
TOTAL CLAIMS		28	28			TOTAL CLAIMS			